Work Order ID 84108

May-03-12 11:24:01 AM

84108

Item ID: D3774-1 **Accept** *N900040100* **Setup Start** *NS1*

Revision ID:

Item Name: Seat Bottom, LH/RH **Stop** *NS2*

Start Date: 03/05/2012 **Start Qty:** 2.00 *2*

Required Date: 17/05/2012 **Req'd Qty:** 2.00 *2*

Reference:

Cust Item ID:

Customer:

Approvals: **Process Plan:** MLJ **Date:** 12/05/03 **Tooling:** _____ **Date:** _____ **Run Start** *NR1*

QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____ **Stop** *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	**Revision Nbr**								
D3774	Rev B								
100		0.00							
100	HAND FINISHING THERMOFORMING								
Thermoform	**Memo**	0.00							
Thermoforming Machine	Set up machine program D3774-1Set up clamping frame as per folio								
110		0.00							
110	HAND FINISHING THERMOFORMING								
Thermoform	**Memo**	0.00							
Thermoforming Machine	Cut Blanks								

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Work Order ID 84108

May-03-12 11:24:01 AM

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Customer:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____ **Run Start** *NR1*

QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____ **Stop** *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
115		0.00							
115	Dry Material								
HandThermo	**Memo**	0.00							
Hand Finishing Thermoforming	Dry Sheet as per QSI022 POLYCARBONATE Temp: 240 Time IN: 11:30 Time OUT: 7:00								12/05/10
120		0.00							
120	THERMOFORMING MACHINE					2			12/05/10
Thermoform	**Memo**	0.00							
Thermoforming Machine	Thermoform as per Dwg. D3774-1 and Folio Dwg. Rev. 3774, Folio Rev. C								
130	QC2- Inspect parts off machine FAI/FAIB	0.00							
130						2			12/05/10
QC	**Memo**	0.00							
Quality Control									

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Item ID: D3774-1 **Accept** *N900040100* **Setup Start** *NS1*
Revision ID: **Stop** *NS2*
Item Name: Seat Bottom, LH/RH

Start Date: 03/05/2012 **Start Qty:** 2.00 *2* **Cust Item ID:**
Required Date: 17/05/2012 **Req'd Qty:** 2.00 *2* **Customer:**
Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____ **Run Start** *NR1*
QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____ **Stop** *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140		0.00							
140	HAND FINISHING THERMOFORMING					x2			12/05/14
Thermoform	**Memo**	0.00							
Thermoforming Machine	Trim to Finished Dimensions								
150	QC2- Inspect parts off machine FAI/FAIB	0.00							
150						x2			12/05/14
QC	**Memo**	0.00							
Quality Control	1) Check dimensions to ensure conformity to drawing tolerances.								
160	QC5- Inspect part completeness to step on W/O	0.00							
160						(2)			12 05 14
QC	**Memo**	0.00							
Quality Control									

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Work Order ID 84108

May-03-12 11:24:01 AM

84108

Item ID: D3774-1 **Accept** *N900040100* **Setup Start** *NS1*

Revision ID:

Item Name: Seat Bottom, LH/RH **Stop** *NS2*

Start Date: 03/05/2012 **Start Qty:** 2.00 *2*

Required Date: 17/05/2012 **Req'd Qty:** 2.00 *2*

Reference:

Cust Item ID:

Customer:

Run Start *NR1*

Stop *NR2*

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
170	Identify as per dwg & Stock Location: 257	0.00							
170						24		12/5/14	
Packaging	**Memo**	0.00							
Packaging									
180	QC21- Final Inspection - Work Order Release	0.00							
180							12/5/14		
QC	**Memo**	0.00							
Quality Control									

MF
12-05-14

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Picklist Print

May-03-12 11:24:05 AM

Work Order ID: 84108

84108

Parent Item: D3774-1

D3774-1

Parent Item Name: Seat Bottom, LH/RH

Start Date: 03/05/2012 **Required Date:** 17/05/2012

Start Qty: 2.00 **Required Qty:** 2.00

Comments: IPP REV:A New Issue 08.06.04 DL verified by:DD
IPP REV. B Dwg. Update 08.08.19 DL IPP Rev. C
Add Step 105 Dry Material 10/04/21 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04		Purchased	No			110	sf	334.6874	10.667	21.334			

MLEXS.125-F60029-04

GE PLASTICS LEXAN SHEET

**

Location	Loc Qty	Loc Code
MAT019	334.6874	
119937	334.6874	

21.334 sq ft

12/05/14

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

DART AEROSPACE LTD	Work Order:	84108
Description: Seat Bottom	Part Number:	D3774-1
Inspection Dwg: D3774 **Rev:** B		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

[X] First Article [ ] Prototype

THERMOFORMING SECTION

Description	Accept	Reject	Method of Inspection	Comments
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

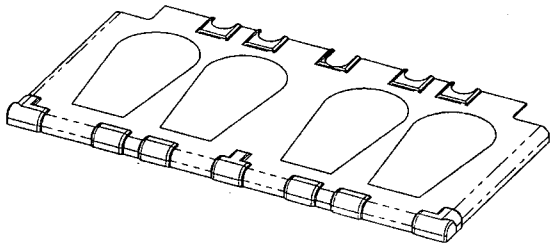
Measured by:	DL	Date:	12/05/10

TRIMMING SECTION

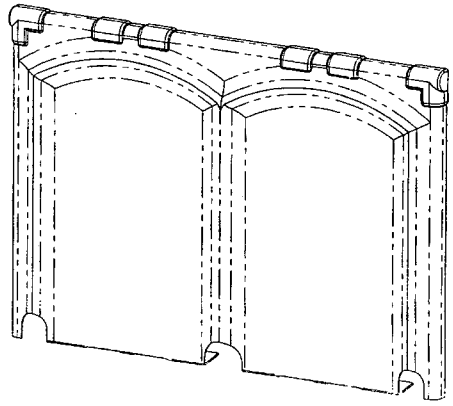
Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
1.3	+/-0.100	1.3 "	✓			
33.9	+/-0.100	33.8 "	✓			
17.4	+/-0.100	17.4 "	✓			
0.085	Min	0.087 "	✓			
0.100	Min	0.102 "	✓			
0.100	Min	0.103 "	✓			
0.100	Min	0.107 "	✓			
0.100	Min	0.101 "	✓			

Measured by:	DL	Date:	12/05/14
Audited by:	[signature]	Date:	12/05/14
Prototype Approval:		Date:	

Rev	Date	Change	Revised by	Approved
A	08.09.04	New Issue	KJ/DL	[signature]



D3774-1 SEAT BOTTOM



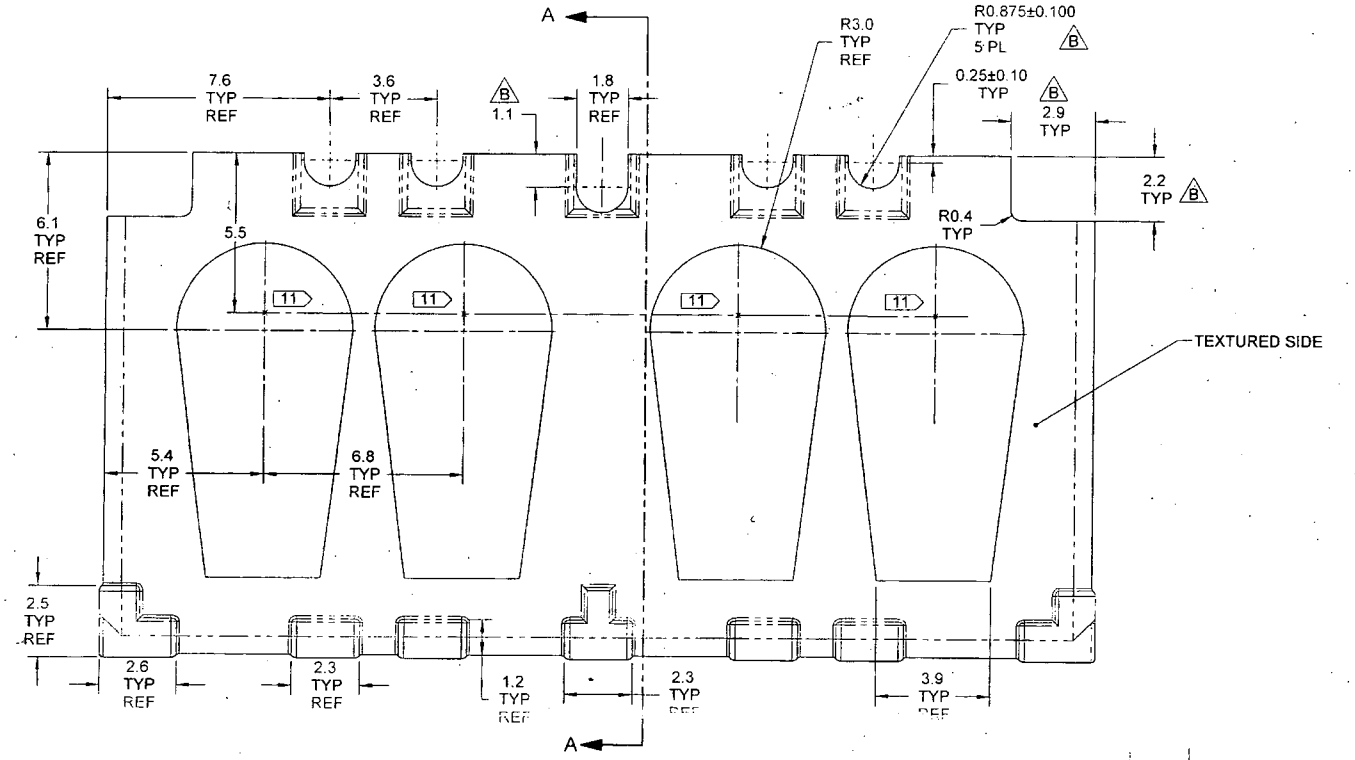
D3774-3 SEAT BACK

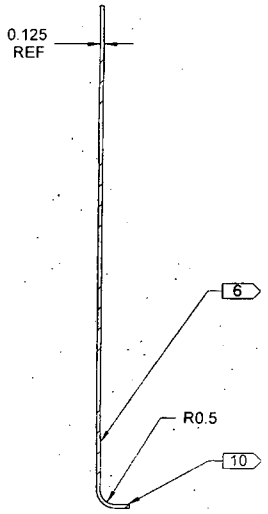
RELEASED
06-08-11

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 84108 MLJ
12/05/03

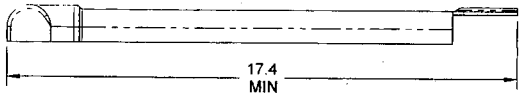
REV.	DESCRIPTION	BY	DATE
B	UPDATE CUTOUT DIMENSIONS (ZN D4-2, D6-2, C4-3, C7-3); UPDATE MINIMUM THICKNESS (ZN A5-2, A5-3); ADD HOLES ON D3774-3 (ZN B6-3) REASON: MANUFACTURING CAPABILITIES	PH	08.07.25
A	NEW ISSUE	HS	08.06.23

DESIGN	HS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA
DRAWN	PH	
CHECKED		DRAWING NO. D3774 REV. B
MFG. APPR.		SHEET 1 OF 3
APPROVED		TITLE SEAT SCALE NTS
DE APPR.		
DATE	08.07.25	





SECTION A-A



04/08

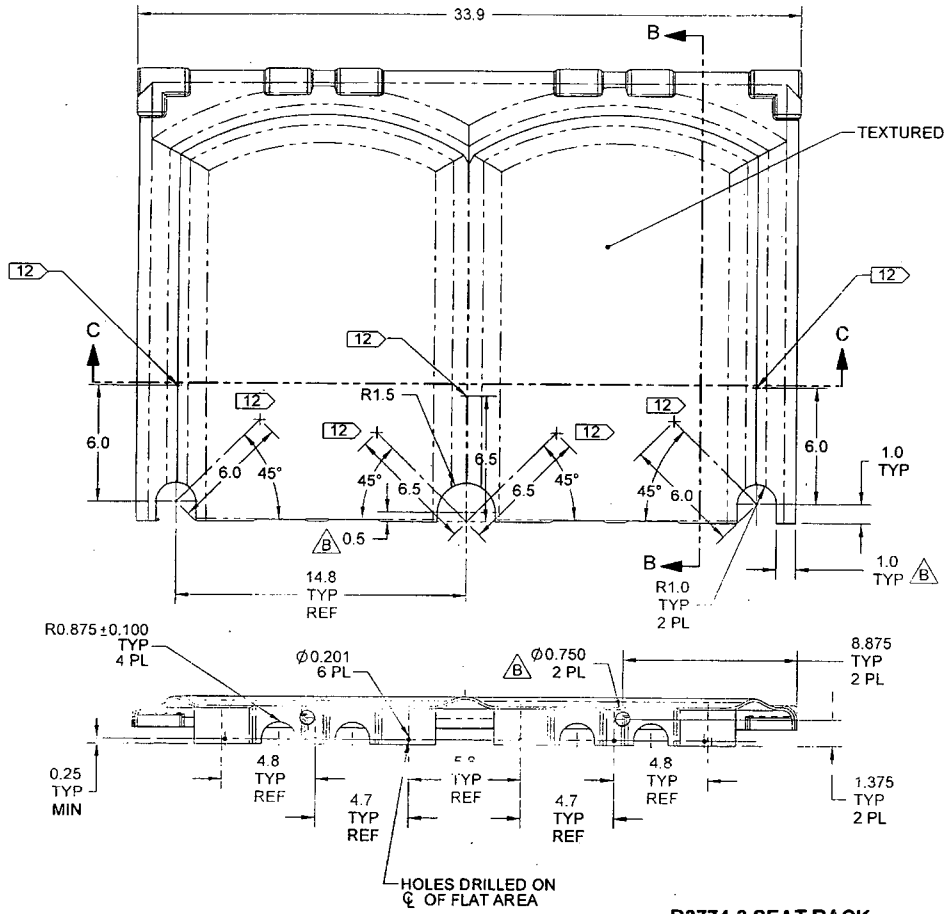
RELEASED 08.08.11 NP

D3774-1 SEAT BOTTOM

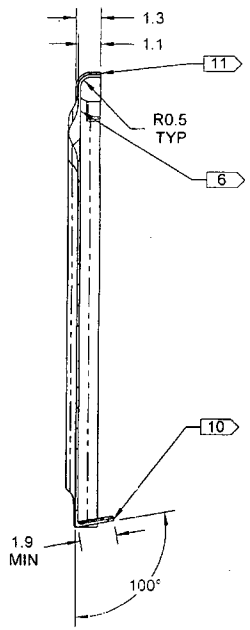
NOTES:
1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125" THICK TEXTURED SIDE UP (REF. DART SPEC MLEXS.125-F60029-04)
2) FINISH: NONE
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3774-1" USING VIBRATING STYLUS
7) WEIGHT: 2.93 lbs
8) PART TO BE PRODUCED FROM MOLD DT9022 AND PER DART QSI 022
9) OVERALL DIMENSIONS GIVEN ONLY FOR FURTHER INFORMATION REFER TO MOLD DT9022
10) MINIMUM MATERIAL THICKNESS AFTER FORMING ON FLANGES (WITHIN 2.0 FROM EDGES) IS 0.085
11) MINIMUM MATERIAL THICKNESS AFTER FORMING AT THESE POINTS IS 0.100 B

DESIGN	HS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA
DRAWN		DRAWING NO. D3774 REV. B
CHECKED		SHEET 2 OF 3
MFG. APPR.		TITLE SEAT SCALE NTS
APPROVED		
DE APPR.		
DATE	08.07.25	

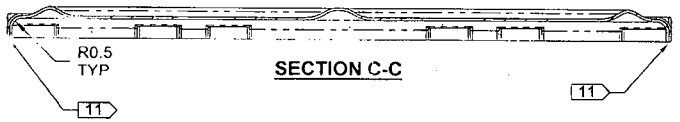
84108



D3774-3 SEAT BACK



SECTION B-B



SECTION C-C

RELEASED 08.05.11

NOTES:
1) MATERIAL: F60029 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125" THICK TEXTURED SIDE UP (REF. DART SPEC MLEXS.125-F60029-04)
2) FINISH: NONE
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3774-3" USING VIBRATING STYLUS
7) WEIGHT: 4.82 lbs
8) PART TO BE PRODUCED FROM MOLD DT9023 AND PER DART QSI 022
9) OVERALL DIMENSIONS GIVEN ONLY FOR FURTHER INFORMATION REFER TO MOLD DT9023
10) MINIMUM MATERIAL THICKNESS AFTER FORMING ON BOTTOM FLANGE IS 0.065
11) MINIMUM MATERIAL THICKNESS AFTER FORMING FLANGES (WITHIN 2.0 FROM EDGES) IS 0.085
12) MINIMUM MATERIAL THICKNESS AFTER FORMING AT THESE POINTS IS 0.100 B

DESIGN	HS	**DART AEROSPACE LTD** HAWKESBURY, ONTARIO, CANADA
DRAWN		DRAWING NO. D3774 REV. B SHEET 3 OF 3
CHECKED		TITLE SEAT SCALE NTS
MFG. APPR.		
APPROVED		
DE APPR.		
DATE 08.07.25		